

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	V.N.V.		10-07-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	10/15
FORMALITY REVIEW	B.H.	300	10-30-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	5-20-03
2	✓	✓	11-13-03
3	✓	✓	4-30-04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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If more than 150 claims or 10 actions
staple additional sheet here

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